

**Travel & Expense Account  
Transmittal Sheet**

**After Approval, Mail Receipts To**

HEADQUARTER ACCOUNTING  
P.O. Box 187019  
Sacramento, CA 95818

Employee Name	<u>KERNAN, Scott</u>
Expense Dates	<u>01/05/10-01/06/10</u>
Total Expense Amount	<u>152.00</u>
Amount Due Employee	<u>152.00</u>
Form ID	<u>TEA000590926</u>

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

Date	Expense Item	Amount	If not submitted - Explain
1) 01/05	Lodging	84.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved  
by:

  
Brett H MORGAN

## Travel & Expense Account Summary

Employee Name                      Scott KERNAN  
Expense Dates                      01/05/10-01/06/10  
Report Name                        5700 January 2010

Request Total    \$        152.00  
Direct Charge Total   -        0.00  
Travel Advances   -        0.00  
Net Due Employee =    152.00

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	Prison Tour	152.00

NOTE: (d)=Direct Charge

DATE	Tue Jan 5	Wed Jan 6								TOTAL
Lunch	10.00	10.00								20.00
Dinner	18.00	18.00								36.00
Incidentals	6.00									6.00
Lodging	84.00									84.00
Breakfast		6.00								6.00
<b>TOTALS \$</b>	<b>118.00</b>	<b>34.00</b>								<b>152.00</b>

## Travel & Expense Account Summary & Detail

Trip/Expense Category	Trip Name	Date	Expense Item	Amount	Payment Type
Regular Travel	Prison Tour	01/05/10	Lunch	10.00	Cash
Regular Travel	Prison Tour	01/05/10	Dinner	18.00	Cash
Regular Travel	Prison Tour	01/05/10	Incidentals	6.00	Cash
Regular Travel	Prison Tour	01/05/10	Lodging	84.00	Cash
Regular Travel	Prison Tour	01/06/10	Breakfast	6.00	Cash
Regular Travel	Prison Tour	01/06/10	Lunch	10.00	Cash
Regular Travel	Prison Tour	01/06/10	Dinner	18.00	Cash

Name:  
Address:

SCOTT KERNAN  
1515 S ST  
SACRAMENTO CA 95811

Arrival Date: 1/05/10  
Departure Date: 1/06/10  
Group Code: TRGGOVT

CI Clerk MSKAGGS  
CO Clerk ASANTIAGO

Room #:		PH 4008	Resv	401763931680	Page	1 of 1
Date	Reference	Description	Charges	Credits	Balance	
01/05/10	401829000055	ROOM CHARGE PH 4008	84.00		84.00	
01/06/10	401833952622	TACHI FD VISA *****6062		84.00		

For future reservations please call 1-800-615-8030.

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Employee Name	<u>KERNAN, Scott</u>
Expense Dates	<u>01/06/10-01/06/10</u>
Total Expense Amount	<u>65.00</u>
Amount Due Employee	<u>65.00</u>
Form ID	<u>TEA000590904</u>

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

Date	Expense Item	Amount	If not submitted - Explain
1) 01/06	Transit Subsidy	65.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved  
by:

Brett H MORGAN

## Travel & Expense Account Summary

Employee Name                      Scott KERNAN  
Expense Dates                      01/06/10-01/06/10  
Report Name                        5700 January 2010

Request Total    \$        65.00  
Direct Charge Total   -        0.00  
Travel Advances   -        0.00  
Net Due Employee   =        65.00

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Non-Travel Expenses	Light Rail	65.00

NOTE: (d)=Direct Charge

DATE	Wed Jan 6									TOTAL
Transit Subsidy	65.00									65.00
TOTALS \$	65.00									65.00

<b>Travel &amp; Expense Account Summary &amp; Detail</b>
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<b>Trip/Expense Category</b>	<b>Trip Name</b>	<b>Date</b>	<b>Expense Item</b>	<b>Amount</b>	<b>Payment Type</b>
Non-Travel Expenses	Light Rail	01/06/10	Transit Subsidy	65.00	Cash

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Employee Name	KERNAN, Scott
Expense Dates	01/25/10-01/25/10
Total Expense Amount	38.00
Amount Due Employee	38.00
Form ID	TEA000590931

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

	Date	Expense Item	Amount	If not submitted - Explain
1)	01/25	Gasoline	30.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved  
by:

  
Brett H. MORGAN

## Travel & Expense Account Summary

Employee Name                      Scott KERNAN  
Expense Dates                      01/25/10-01/25/10  
Report Name                        5700 January 2010 Receipts

Request Total    \$        38.00  
Direct Charge Total   -        0.00  
Travel Advances   -        0.00  
Net Due Employee =        38.00

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Non-Travel Expenses	CDA	38.00

NOTE: (d)=Direct Charge

DATE	Mon Jan 25									TOTAL
Parking, Auto	8.00									8.00
Gasoline	30.00									30.00
TOTALS \$	38.00									38.00

<b>Travel &amp; Expense Account Summary &amp; Detail</b>
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<b>Trip/Expense Category</b>	<b>Trip Name</b>	<b>Date</b>	<b>Expense Item</b>	<b>Amount</b>	<b>Payment Type</b>
Non-Travel Expenses	CDAA	01/25/10	Parking, Auto	8.00	Cash
Non-Travel Expenses	CDAA	01/25/10	Gasoline	30.00	Cash

<b>Travel &amp; Expense Account Summary &amp; Detail</b>
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<b>Comments</b>	
<b>Subject</b>	<b>Comment</b>
Gasoline on 01/25/10 for 30.00	did not have state issued gas card